

Integrated Care Initiative Oversight, Monitoring and Continuous Improvement Stakeholder Workgroup Meeting #1 July 24, 2012, 3:00-5:00 PM

Highlights from Workgroup Meeting #1

Your input into this workgroup process is very much valued and appreciated. The following is a summary of our discussion from this session:

Quality Reporting Concerns/Recommendations:

- Establishing of benchmarks in relation to other Medicaid Plans, with the goal of developing an integrated performance measure system.
- Development of a dashboard (public reporting).
- Use existing and nationally-endorsed quality metrics
- How will reporting address and/or include Severe and Persistent Mental Illness (SPMI)?
- Determine the priority of measures and process for including new future measures.
- What are some potential measures and reporting mechanism to track reasons why members go on and off plans, "member churn."
- What type of data collection mechanism should be utilized and what opportunities exist.
- A goal is to identify outcomes measures from current challenges/problems.
 - o Action Item: Map measures to identified issues/targets.

Criteria/Data Sources:

- NQF
- NCQA/HEDIS
- Alignment of measures with other initiatives such as a recent CMS Adult Medicaid Quality Grant, Measuring and Improving the Quality of Care in Medicaid. A brief overview of this opportunity was discussed with a recommendation to review the Initial Core Set of Quality Measures for Medicaid eligible adults.
- Provider (Electronic Medical/Health Records)
- Population Based Measures



Quality Domain Recommendations:

- Financial
 - Utilization
 - Cost Savings/Efficiencies
- Medicaid/Medicare Integration of Care & Services
- Quality of Life
 - o Poverty Issues (housing, home safety, food, transportation etc..)
 - o End of Life Care (Advance Directives)
- Care Management/Care Transitions
 - Screening/Assessment (inclusion of behavioral health, specifically pain management and substance abuse
 - Inclusion of geriatricians and geriatric specialists/trained nurses, social workers etc.)
 - Communications
 - Provider to Provider
 - Provider to Community based provider
 - Provider to Member/Patient
- Member Satisfaction
 - o Person-Centered Care
- Access to Care
 - o Enrollment & Disenrollment
 - o Churn & continuity of care
- Functional Status
 - o SF-36
 - Katz Index
 - Employability (Recommendation to connect with DLT and/or Rehab Providers)
 - Health & Wellness

Parking Lot:

- How will this initiative will align with concurrent initiatives, such as the health insurance exchange or CMMI Innovations Challenge grants
- The operations and logistics of the programs and its intersection with other initiatives (e.g., Health Home Initiative, Sherlock Plan)